

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
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WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well: <b>Wichita</b>		Fraction <b>S/W 1/4 S/W 1/4 N/W 1/4</b>	Section number <b>7</b>	Township number <b>T 16 S R 36 E/W</b>	Range number <b>#</b>
2. Distance and direction from nearest town or city: <b>13 1/2 W. 1 E. of Leoti, Kansas</b> Street address of well location if in city:			3. Owner of well: <b>Richard Hobson</b> R.R. or street: City, state, zip code: <b>Leoti, Kansas 67861</b>		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: <b>I well</b> <b>1800'</b> <b>I septic</b>		6. Bore hole dia. <b>9</b> in. Completion date <b>4/23/1978</b> Well depth <b>136</b> ft.	
5. Type and color of material		From	To	7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
clay		0	30	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
Gyp		30	35	9. Casing: Material <b>Plastic</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Glue Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>1.8</b> lbs./ft. Dia. <b>5</b> in. to <b>116</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. <b>250</b>	
Clay		35	41	10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>RMP</b> Dia. <b>5"</b> Slot/gauze <b>1/16"</b> Length <b>20'</b> Set between <b>116</b> ft. and <b>136</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <b>Yes</b> Size range of material <b>1/4x1/8"</b>	
Gyp		41	47	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>107</b> ft. below land surface Date <b>4/21/1978</b>	
Clay		47	52	12. Pumping level below land surfaces: <b>120</b> ft. after <b>2</b> hrs. pumping <b>18</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>18</b> g.p.m.	
Sand rock		52	56	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
Clay		56	60	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> inches above grade	
Sand coarse		60	69	15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>15</b> ft.	
Sand rock H		69	72	16. Nearest source of possible contamination: ft. <b>1800</b> Direction <b>S/E</b> Type <b>septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Clay		72	92	17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Red Jacket</b> Model number <b>9CB</b> HP <b>1 1/2</b> Volts <b>230</b> Length of drop pipe <b>130</b> ft. capacity <b>18</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
Sand coarse		92	119	20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>Weishaar Drilling &amp; Sup. 232</b> Business name <b>232</b> License No. <b>232</b> Address <b>Leoti, Kansas 67861</b> Signed <b>[Signature]</b> Date <b>5/22/78</b> Authorized representative	
Sand rock H		119	125		
Yellow		125	136		
(Use a second sheet if needed)					
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks:			

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5